24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee FlexPoint Media Inc	Date of Public Distribution/Dissemination
	06 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 1051	Amount
City State Zip Code	231875.00
New Albany OH 43054	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	06 / 02 / Y 2022
Name of Federal Candidate Support Office	Sought: House District: 02
Tarkanian, Danny, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbur 2022	rsement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Johnson Strategies	06 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4612 Dusik Lane	Amount
City State Zip Code	10000.00
Austin TX 78746	Transaction ID : 002 Date of Disbursement or Obligation
Purpose of Expenditure Media production Category/ Type 004	06 03 / 2022
Name of Federal Candidate Support Office	Sought: M House District: 02
Tarkanian Danny	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	rsement For: X Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	241875.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	241875.00
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	·
Crosby, Caleb, , , [Electronically Filed] Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	